

Human Research Program (HRP) Overview

Briefing to NAC Research Subcommittee
July 31, 2013

### **NASA Human Research Program (HRP)**

#### Mission

 To enable space exploration beyond low Earth orbit by reducing the risks to human health & performance through a focused program of basic, applied, and operational research

#### Goals

- Perform research necessary to understand and reduce spaceflight human health and performance risks in support of exploration
- Develop and validate technologies that serve to characterize and reduce medical risks associated with human spaceflight
- Enable development of human spaceflight medical and performance standards

## Integrated Human Health Risk Mitigation

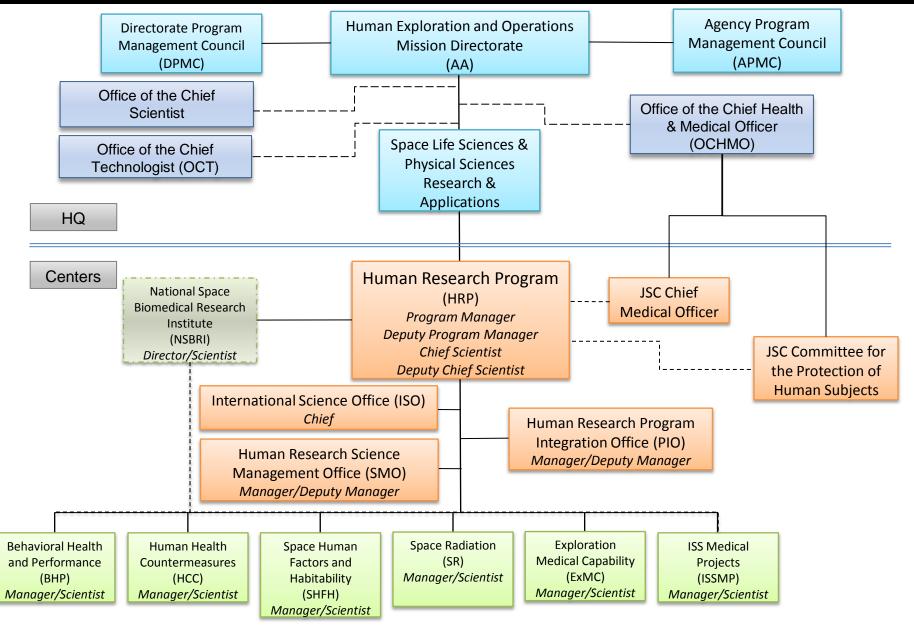
- Policy, Operations, and Research are integrated through a Human Health Risk Framework
  - Office of the Chief Health and Medical Officer (OCHMO)
    - Medical Policy, Health and Performance Standards, and Bioethics (IRB, ACUC, Risk Threshold)
  - Crew Health and Safety (CHS)
    - Medical Operations and Occupational Health (career health care/post career monitoring)
  - NASA Human Research Program (HRP)
    - Human health & performance research in support of space exploration
      - Perform research necessary to understand
         & reduce health & performance risks
  - International Space Station (ISS)
    - Medical Operations on ISS
      - Medical Tests and hardware



ISS

# **Overview: Organization**





# Hazards Create Risks During Space Flight



### **Space Flight Hazards to Crew Members:**

### decreased gravity/gravity transitions\*

bone, muscle, cardiovascular, sensory-motor, nutrition, immunology, human factors, clinical medicine

### isolation/confinement\*

behavior/performance, nutrition, immunology, toxicology, microbiology

### altered light-dark cycles\*

behavior/performance

### increased radiation\*

carcinogenesis, tissue degeneration(cardiovascular), CNS effects, acute (SPEs)

### distance from Earth

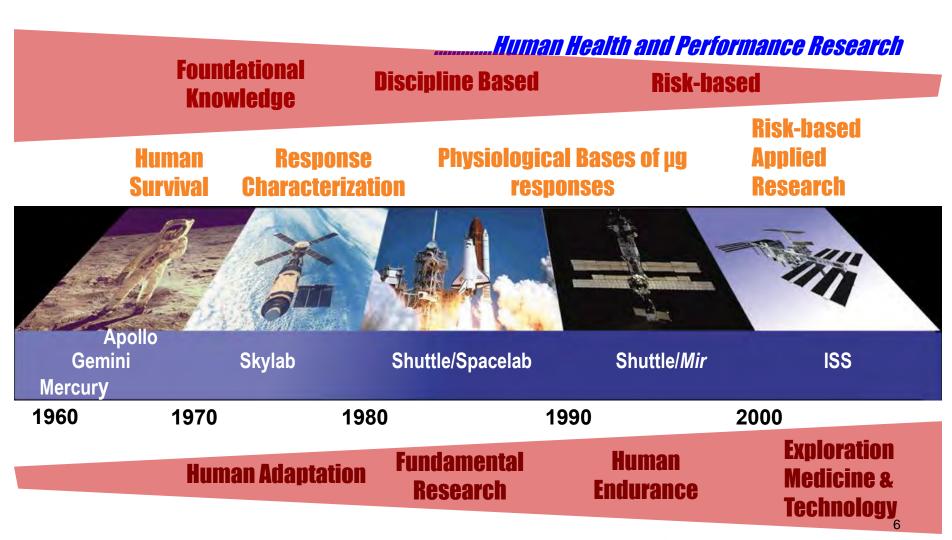
behavior/performance, autonomy, food systems, clinical medicine

\*effect severity increases with mission duration

## **Spaceflight: Human Health History**



"Extending the spatial and temporal boundaries of human space flight is an important goal for the nation and for NASA" (National Academies, IOM, 2006)



....Research Canacity

### **Human Health and Performance Risks**



### 47 Human Space Flight Health and Performance Risks

- Crew Health and Safety Risks (Medical Operations): current crew and space mission
- Human Research Program Risks: require active research program to mitigate the risk for future long-duration missions
- All human health and performance risks are managed and assessed by the NASA Human System Risk Board

#### **Crew Health and Safety Risks (Medical Operations)**

Risk of Toxic Exposure

Risk of Common Medical Events

Risk of Hearing Loss Related to Spaceflight

Risk of Injury from Sunlight Exposure

Risk of Urinary Retention

Risk of Space Adaptation Back Pain

Risk of Probability of mild Acute Mountain Sickness (AMS) in astronauts resulting in reduced crew performance prior to adaptation to a mild hypoxia.

Risk of Inability to Certify Environment for Flight

Risk of Acute and Chronic Carbon Dioxide Exposure

Risk of Adverse Behavioral Conditions

Risk of Psychiatric Disorders

Risk of Compromised EVA Performance & Health Due to Inadequate EVA Suit Systems (MOD)

Risk of Compromised EVA Performance & Crew Health Due to Inadequate EVA Suit Systems

Risk of Exceeding Career Radiation Exposure Limits

Risk of Limited Crew Selection Due to Radiation Exposure Limits

# Human Research Program Risks By Element: Reviewed by the National Academies' Institute of Medicine



#### Space Human Factors & Habitability Risks

Risk of Performance Decrement and Crew Illness Due to an Inadequate Food System

Risk of Inadequate Human-Computer Interaction

Risk of Performance Errors Due to Training Deficiencies

Risk of Inadequate Design of Human and Automation/Robotic Integration

Risk of Inadequate Critical Task Design

Risk of Adverse Health Effects of Exposure to Dust and Volatiles During Exploration of Celestial Bodies

Risk of an Incompatible Vehicle/Habitat Design

Risk of Adverse Health Effects Due to Alterations in Host-Microorganism Interactions

#### **Behavior Health & Performance Risks**

Risk of Adverse Behavioral Conditions and Psychiatric Disorders

Risk of Performance Errors Due to Fatigue Resulting from Sleep Loss, Circadian Desynchronization, Extended Wakefulness, and Work Overload

Risk of Performance Decrements due to Inadequate Cooperation, Coordination, Communication, and Psychosocial Adaptation within a Team

#### **Space Radiation Risks**

Risk of Radiation Carcinogenesis

Risk of Acute Radiation Syndromes Due to Solar Particle Events

Risk of Acute or Late Central Nervous System Effects from Radiation Exposure

Risk of Degenerative Tissue or other Health Effects from Radiation Exposure

#### **Exploration Medical Capability Risks**

Risk of Unacceptable Health and Mission Outcomes Due to Limitations of In-flight Medical Capabilities

#### **Human Health Countermeasures Risks**

Risk of Orthostatic Intolerance During Re-Exposure to Gravity

Risk of Early Onset Osteoporosis Due to Spaceflight

Risk Factor of Inadequate Nutrition

Risk of Compromised EVA Performance and Crew Health Due to Inadequate EVA Suit Systems

Risk of Impaired Performance Due to Reduced Muscle Mass, Strength and Endurance

Risk of Renal Stone Formation

Risk of Bone Fracture

Risk of Intervertebral Disc Damage

Risk of Cardiac Rhythm Problems

Risk of Reduced Physical Performance Capabilities Due to Reduced Aerobic Capacity

Risk of Crew Adverse Health Event Due to Altered Immune Response

Risk of Impaired Control of Spacecraft, Associated Systems and Immediate Vehicle Egress due to Vestibular / Sensorimotor Alterations Associated with Space Flight

Risk of Clinically Relevant Unpredicted Effects of Medication

Risk of Spaceflight-Induced Intracranial Hypertension/Vision Alterations

Risk of Decompression Sickness

Risk of Injury from Dynamic Loads

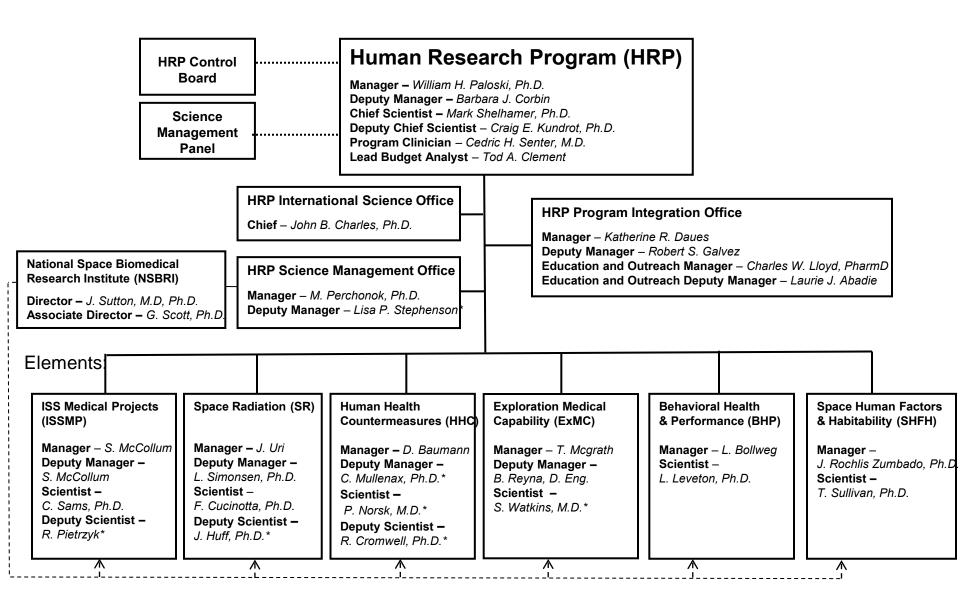
# Space Flight Health Standards (NASA-STD-3001)



Standard Area	Туре	Standard	Deliverables
Bone	POL	Maintain bone mass at ≥-2SD	□ Risk assessment/ knowledge
Cardiovascular	FFD	Maintain ≥75% of baseline VO2 max	quantification Risk reduction knowledge/
Neurosensory	FFD	General Sensory Motor, Motion Sickness, Perception, Gaze Control	mechanisms  CM/ nutrition,
Behavioral	ral FFD Maintain non cognitive test		pharmacology, exercise, A/G, other biomechanical
Immunology	POL	WBC > 5000/ul CD4 + T > 2000/ul	<ul><li>Medical</li><li>Assessment/</li><li>diagnosis/</li></ul>
Nutrition	POL 80% of spaceflight- modified/USDA nutrient requirements		treatment
Muscle	FFD	Maintain 70% of baseline muscle strength	
Radiation	PEL	≤ 3% REID (Risk of Exposure Induced Death)	

### **HRP Organization**





\* Contractor

# **Human Research Program**

- Science Management & Program Integration Office
  - Peer Review, Task/Risk Management, Data Archive
  - Program planning, integration & control
- Elements
  - Space Radiation
    - Radiation exposure limits and health effects
  - Human Health and Countermeasures
    - Physiology, nutrition, immunology, pharmacology, ocular impairment
  - Behavioral Health and Performance
    - Individual, interpersonal interactions, sleep, stress
  - Space Human Factors and Habitability
    - Interfaces between humans and vehicles/habitats
  - Exploration Medical Capability
    - Medical care for missions beyond low Earth orbit
  - ISS Medical Projects
    - Infrastructure for flight and analog experiments
  - National Space Biomedical Research Institute
    - Cooperative agreement to pursue research that complements the HRP portfolio



### Flight and Ground Facilities

### International Space Station

- Critical to understanding and mitigating a majority of the exploration human risks
- Important test bed for space biomedical technology

### NASA Space Radiation Laboratory (NSRL)

- Brookhaven National Laboratory (DOE)
- Critical to Space Radiation Research

### Ground-based Analogs

- Bed Rest Capability for Human Health Countermeasures Research (NIH)
- Isolation Studies
  - Antarctica (NSF, International)
  - Chamber studies (e.g. Mars 500)



# Human Research Program FY13 Budget



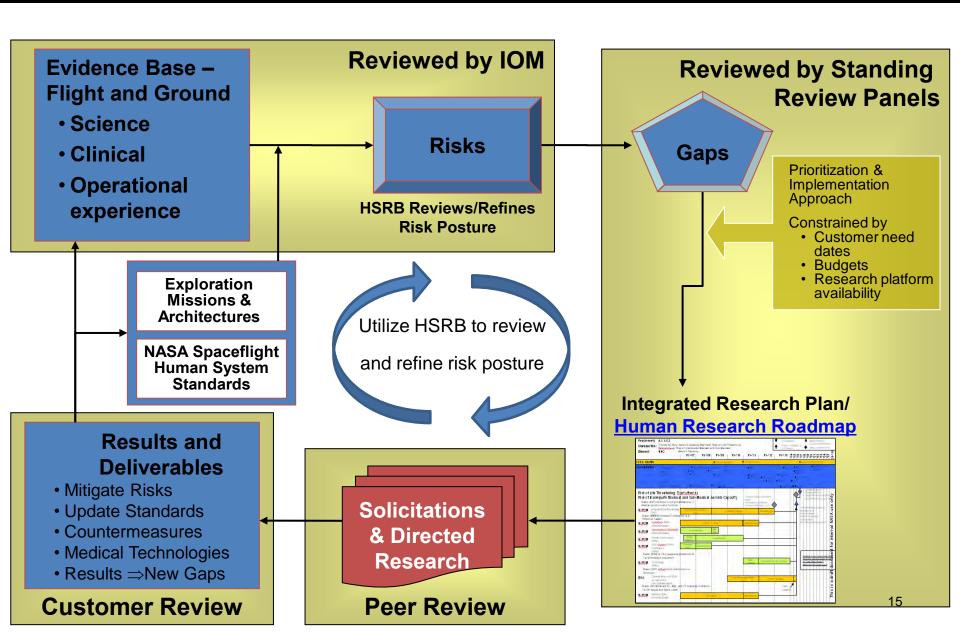
	FY13
HRP FY13 Execution	
By Program Element	146.7
Exploration Medical Capability (ExMC)	8.3
Space Human Factors & Habitability (SHFH)	11.4
Human Health & Countermeasures (HHC)	27.9
Space Radiation (SR)	36.6
ISS Medical Projects (ISSMP)	24.8
Behavioral Health & Performance (BHP)	4.0
Program Science Management (PSM)/NSBRI	30.1
Program Support	3.6
By Procurement, Labor, & Travel	146.7
Program Procurement	125.0
Program CS Labor & Travel (~127 CS at JSC, ARC, GRC, & LaRC)	21.7
By Procurement Content	125.0
Research Grants & Contracts (72% Solicited, 28% Directed)	60.4
Major Facilities (ISSMP, NSRL)	33.7
Major Technical Contract (Internal Eng, Sci, & Develop)	17.3
Science & Program Management, Peer Review, LSDA	9.0
Reserve & Other	3.6
Outreach	1.0

### **HRP Research Strategy and Approach**

- Align program structure and content to directly support Agency human exploration goals
  - Clearly define the long-duration space mission health risks to space explorers in coordination with OCHMO
- Implement evidence/risk-based program architecture
  - Highest health risks associated with exploration missions have been identified, documented, reviewed, and are actively managed
- Vet program risks, contents, and priorities through independent review panels
  - Research underpinnings have been established by the National Academies
- Implement a National Research Program that uses competitive solicitation processes and independent, external scientific review used to acquire highest quality research
  - Leverage off of the National Biomedical Infrastructure
- Leverage resources through collaborative research with other NASA Programs, Internationals, and other U.S. Agencies
  - Space Biology
  - Advanced Exploration Systems (AES)
  - ISS National Laboratory

# Architecture: Evidence → Risks → Gaps → Tasks → Deliverables

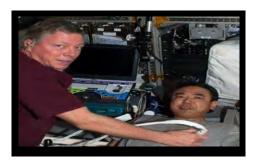






# **Research & Technology Deliverables**

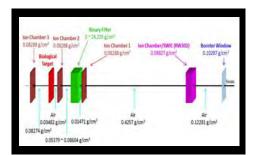




Portable Medical Imaging



Physiological Monitoring Systems



**Updated Space Radiation Codes** 



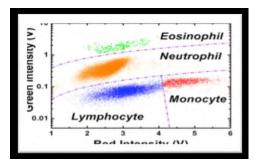
ISS instrumented harness study



In-situ-Intravenous (IV) Fluid Generation technology



Remote Medical Capability: Diagnostic guide to assist with ultrasound imaging



Technology for astronaut health monitoring



Spinal Elongation Study



Lunar Dust Permissible Exposure Limit

# **External Research Community**

#### Strategic Planning

- National Academies (IOM, NRC)
  - Risk Reduction Strategy for Human Exploration of Space
  - Review of HRP Evidence Base and Merit Review Process
- National Council on Radiation Protection (NCRP)
- NASA Advisory Committee (NAC)
- Annual Standing Review Panels (SRP)

### Science Planning

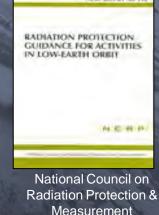
- Research and Clinical Advisory Panel for Visual Impairment, Papilledema & VIIP Summits
- Telemedicine Summit, Osteoporosis & Bone Summits
- Lunar Atmospheric Dust Toxicity Assessment Group
- Decompression Risk Review, Dental Working Group
- Acute Risk: Radiation Workshop, CNS Research Panel,
- Habitable Volume Workshop

#### Research Implementation

- National Research Solicitations
  - Crew Health and Performance NRA, Space Radiobiology NRA
- Graduate Student and Post-Doctoral Programs



A Risk Reduction Strategy for Human Exploration of Space





NRC Report on NASA Cancer Risk Models

> IOM Review of NASA's Human Research Program Evidence Books

REVIEW OF NASA'S HUMAN RESEARCH PROGRAM EVIDENCE BOOKS

A Letter Report

COMMITTEE ON NASA'S RESEARCH ON HUMAN HEALTH RISKS

BOARD ON HEALTH SCIENCES POLICY
INSTITUTE OF MEDICINE

## **External Interfaces/Collaborations**

**NSBRI** 

70 Institutions across 22 states



http://taskbook.nasap rs.com/Publication/w elcome.cfm

### NIH

Clinical Research Centers Anti-oxidant

Anti-oxidant research

#### DOE

Low Dose Radiation Research

NASA Space Radiation Lab



esa

External Research Community

200 Tasks across 27 States HRF

#### **ISS Partners**

Collaborative research ISS utilization ISLSWG, JWG



#### DOD

Prepackaged Food Field Trauma Care

NAC

Program Oversight

# National Academies

Research Recommendations



ROSCOSMOS

### **Internal Collaborations**



#### Crew Health & Safety (& ISS Med Ops)

- Visual Impairment/Intracranial Pressure (VIIP)
- Astronaut Occupational Surveillance
- Extending Shelf Life of Pharmaceuticals in Spaceflight
- Integrated Radiation Protection Portfolio: integrated approach to radiation protection.

#### ISS Program

- Developing Advanced Exercise Hardware: effective loads and prescriptions.
- Multilateral & ISS12 Coordination: ISS one-year mission development and implementation
- Understanding the impact of communication delay and autonomous operations
  - Examine the impact of communication delays on individual and team performance.

#### MPCV

- Exploration Exercise Hardware: exercise hardware using fewer vehicle resources.
- Occupant Protection: low frequency vibration, rotational oscillations, acoustics & dosimetry
- Food Mass Reduction: develop nutrient dense meal replacement options

#### STMD

- SBIR is an integral part of HRP's Integrated Research Plan
  - HRP Exercise load sensing, Medical technologies, Inflight Sample Analysis
  - Behavioral Health and Human Factors tools
  - Advanced food technologies: Bulk overwrap concept for ISS food packaging

### **Internal Collaborations**



#### Space Biology

- Advanced Food and Plant research to inform bioregenerative life support efforts
  - Exploration nutritional requirements cannot be met with current pre-packaged food system.
- Microbial assessment/Observatory
  - Space-induced changes in microbial virulence, crew susceptibility & host-microbial interactions
- In flight Laboratory Analysis: Limited conditioned stowage/downmass require on-orbit analysis
- Rodent Research targeting biomedical risks
  - Key biomedical risks require the use of rodent models to address specific research gaps
- Gene Lab: Expressomics and Bioinformatics
  - High content screening as platform for high density/high throughput ISS life science utilization

#### AES

- Space Radiation
  - NSRL Phase 1 upgrade: HRP/AES shared cost of Mixed field GCR capability at NSRL
  - MSL Rad
  - Space Radiation Shielding
- Crew Mobility Systems: EVA suit injury countermeasures & MMSEV exploration atmosphere
- Deep Space Habitat Systems
  - AES transferred HDU to HRP (HERA)
  - Medical operations and equipment: medical scenarios to evaluate during testing, medical station needs/equipment, med kit sizing, layout, etc.
  - Habitable volume: ops concepts, design principles/ guidelines, test, validation, and objective human performance data in an integrated analog environment
  - Exercise equipment and Food systems: better define long duration mission requirements
  - AES subsystem testing
- Operations: Autonomous operations and Analog assessments

### **International Research Coordination**



- International Space Life Sciences Working Group (ISLSWG)
  - NASA, ESA, JAXA, CSA, DLR, CNES, ASI
  - International Life Science Research Announcement
- US/Russian Joint Working Group (JWG) on Space Biomedical and Biological Sciences
  - NASA Biomedical and Biological Science Programs work with State Scientific Center of the Russian Federation – Institute for Bio-Medical Problems (IMBP)
  - Three joint sub-groups
    - (i) Biomedical (ii) Crew Health and Medical Support (iii) Biological Sciences
- Multilateral Human Research Panel for Exploration (MHRPE)
  - Coordinates the exploration fly off plan for multilateral ISS biomedical research
  - Coordinates subject, hardware, and data sharing
  - Focused on the ISS-12 mission.



# International Coordination: Exploration Biomedical Challenges



Not Not mission Potential Mission	I HUHIAH HEARH AND FERDINANCE MISKS	Mission				
limiting increased limiting		ISS 6 mo	Lunar 6 mo	NEA (1yr)	Mars (3yr)	
Musculoskeletal	Long-term health risk of Early Onset Osteoporosis; Mission risk of reduced muscle strength and aerobic capacity					
Sensorimotor	Mission risk of sensory changes/dysfunctions					
Ocular Impairment	Mission and long-term health risk of Microgravity-Induced Visual Impairment and/or elevated Intracranial Pressure (VIIP)			<u>U</u>	<u>U</u>	
Nutrition	Mission risk of behavioral and nutritional health due to inability to provide appropriate quantity, quality and variety of food					
Autonomous Medical Care	Mission health risk due to inability to provide adequate medical care throughout the mission (Includes onboard training, diagnosis, treatment, and presence/absence of onboard physician)					
Behavioral Health and Performance	Mission and long-term behavioral health risk.					
Space Radiation	Long-term risk of carcinogenesis and degenerative tissue disease due to radiation exposure					
Toxicity	Mission risk of exposure to a toxic environment without adequate monitoring, warning systems or understanding of potential toxicity (dust, chemicals, infectious agents)					
Autonomous Emergency Response	Medical risks due to life support system failure and other emergencies (fire, depressurization, toxic atmosphere, etc.), crew rescue scenarios					
Hypogravity	Long-term risk associated with adaptation during IVA and EVA on the Moon, asteroids, Mars (vestibular and performance dysfunctions) and post-flight rehabilitation				<u>U</u> 23	

## Overview: Human Research Programmatic Reviews



NESC Review of Occupant Protection Risk 3/13 to 4/13

Standing Review Panels-Gaps/Task 10/12 to 2/13

Program Status Review 9/12

<u>Institute Of Medicine – Review HRP peer review of</u>

<u>directed research proposals</u> 3/12

Standing Review Panels-Status 12/11

Standing Review Panels-Integration 12/10

IRP RevB -Human Research Roadmap 7/10

Program Status Review 8/10

HRP Evidence Book Volume 2 2/10

Standing Review Panels-Gaps/Tasks 12/09

<u>Interim Program Implementation Review</u> **8/09** 

Publish Evidence Book Volume 1 5/09

Baseline Integrated Research Plan 2/09

Program Implementation Review 8/08

NAS – Managing Space Radiation Risk 7/08

Institute Of Medicine – Review Evidence/Risks 7/08

Programmatic Reviews - Establish Evidence 8/06

National Council for Radiation Protection 7/06

Institute of Medicine (NRC) A Risk Reduction Strategy for Human

Exploration of Space - **06/06** 

**Exploration Systems Architecture Study 11/05** 

Internal to HRP

External to HRP

# **2012 Program Status Review: Executive Summary**



HRP program schedule and resources are managed in an effective manner, consistent with the research program guidance prescribed in 7120.8, providing the essential flexibility to execute a research program where results are not fully predictable.

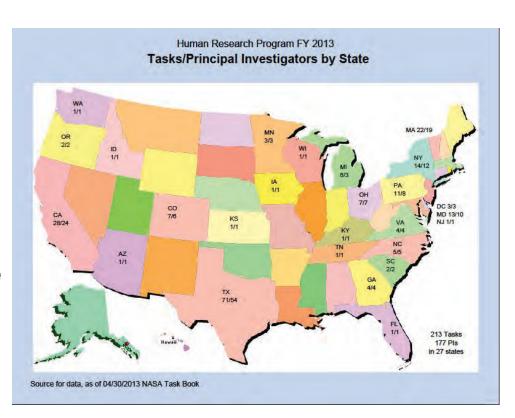
- The program has been reviewed frequently to assess its execution readiness.
- Each program element has a panel of experts who conduct an annual peer review of the project contents and recommend changes as appropriate.
- The program/element content formulation process (evidence -> Human Risk -> gaps -> tasks -> deliverables) is well conceived, as it provides a strong focus to the Human Health and Performance requirements of human space flight.
- The program has enjoyed stable funding and has benefitted greatly from the leadership of a mature, experienced management team.
- HRP has contributed significant results to human space flight standards and has delivered knowledge, strategies, and technologies to mitigate risks to human health.

**Status Review Board (SRB) Conclusion**: Crew health and performance are critical to successful human exploration beyond low-Earth orbit. Without HRP results, NASA will face unknown and unacceptable risks for mission success and post-mission crew health.

### **Human Research Program Tasks**



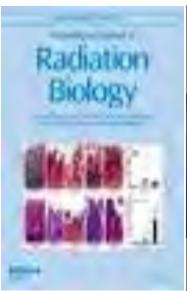
- Research portfolios are largely determined by a competitive peer review process through NASA Research Announcements
  - HRP Grants Budget ~ \$55M
- Research grants status & progress reported in the Space Life & Physical Sciences Research & Applications Division Task Book
  - 213 tasks, 27 States
  - 177 Pls, 547 Co-ls, 124 Post Docs
  - Students: 96 PhD, 38
     Masters, 100 Bachelor



http://taskbook.nasaprs.com/Publication/welcome.cfm

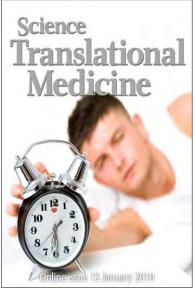
### **HRP Cover Publications**

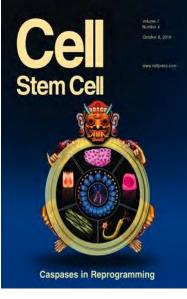












#### **Area: Space Radiation**

March 2012: International Journal of Radiation Biology. The study provided evidence that exposure to radiation doses as low as 1 Gy can induce a significant increase in intestinal tumor multiplicity and enhance tumor progression in vivo.

#### **Area: Nutrition**

February 2011: Research sponsored by HRP and NSF was featured on the cover of the Journal of Nutrition. The study provided evidence that in the absence of UV light, Vitamin-D supplementation can provide adequate levels of vitamin D and has the potential to mitigate immunosuppression in environments where stress hormones are elevated.

#### Area: Circadian Misalignment and Fatigue in Space

May 2010: Characteristics of Light Exposure Necessary for Development of Optimal Countermeasures to Facilitate Circadian Adaptation and Enhance Alertness and Cognitive Performance in Space

### Area : Human Factors and Performance

Jan 2010: Uncovering Residual Effects of Chronic Sleep Loss on Human Performance. User-friendly software to predict individual human performance and alertness in space and on Earth

#### Area : Space Radiation

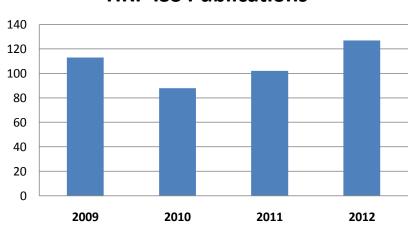
October 2010: Surprising finding that caspases (enzymes) previously associated with cell death regulation, play key roles i the reprogramming of human fibroblasts into induced pluripote (capable of differentiating into different types of body cells) ster cells, potentially useful for human regenerative medicine.

### **HRP Publication Metrics**



	FY09	FY10	FY11	FY12		
Peer-Reviewed Journal Articles	348	286	312	274		
Book/Book Chapters	22	29	24	28		
Patents	6	11	4	3		
	1 in <i>Natur</i> e	2 in Science	2 in <i>Nature</i>	2 in <i>Science</i> 1 in <i>Natur</i> e		

#### **HRP ISS Publications**



#### **Q2 High Impact Publications (JIF>4)**

- 1. Basner M et al. Mars 520-d mission simulation reveals protracted crew hypokinesis and alterations of sleep duration and timing. **PNAS**, **2013**
- Wang M et al. Novel Smad proteins localize to IR-induced double-strand breaks: interplay between TGFbeta and ATM pathways. Nucleic Acids Res, 2013. 41(2): p. 933-42.
- 3. Nguyen DH et al. Murine microenvironment metaprofiles associate with human cancer etiology and intrinsic subtypes. **Clin Cancer Res, 2013**. 19(6): p. 1353-62.
- 4. Barcellos-Hoff MH New biological insights on the link between radiation exposure and breast cancer risk. **J Mam Gland Biol Neoplasia**, **2013**. 18(1): p. 3-13.
- 5. Tang H et al. A 12-gene set predicts survival benefits from adjuvant chemotherapy in non-small cell lung cancer patients. Clin Cancer Res, 2013. 19(6): p. 1577-86.
- Klerman EB et al. Survival analysis indicates that age-related decline in sleep continuity occurs exclusively during NREM sleep. Neurobiol Aging, 2013. 34(1): p. 309-18.
- 7. Leblanc A et al. Bisphosphonates as a supplement to exercise to protect bone during long-duration spaceflight. **Osteoporos Int, 2013**.
- 8. Trani D et al. Sex-dependent differences in intestinal tumorigenesis induced in Apc1638N/+ mice by exposure to gamma rays. **Int J Radiat Oncol Biol Phys, 2013**. 85(1): p. 223-9.
- 9. Zheng Z et al. Combining heavy ion radiation and artificial microRNAs to target the homologous recombination repair gene efficiently kills human tumor cells. **Int J Radiat Oncol Biol Phys, 2013.** 85(2): p. 466-71.
- 10. Datta K et al. Heavy ion radiation exposure triggered higher intestinal tumor frequency and greater β-catenin activation than γ radiation in APC(Min/+) mice. **PLoS One. 2013**; 8(3):e59295.
- Olsen RH et al. Enhanced hippocampus-dependent memory and reduced anxiety in mice over-expressing human catalase in mitochondria. J Neurochem, 2013.
- 12. Mateus J and AR Hargens, Bone hemodynamic responses to changes in external pressure. **Bone**, **2013**. 52(2): p. 604-10

# **NASA/NSBRI** National Research Solicitations



Description	Solicitation Release	NOI/Step 1 Due Date	Proposal Due Date	Award Letters Sent	Days from Due Date to Letters	Differenc e from 150 day metric	Step-1s / NOIs processed	_	Reviewer s Supporte d	Panels Supporte d	Proposals Selected	Selection %
Ground-Based Studies in Space Radiobiology	2/13/13	3/15/13	5/28/13	TBD	TBD	TBD	64	TBD	TBD	TBD	TBD	TBD
Research and Technology Development to Support Crew Health and Performance in Space Exploration Missions	7/30/12	9/4/12	12/3/12	4/29/13	147	-3	157	100	58 panelists / 15 mail	9	13 NASA / 9 NSBRI	22%
Ground-Based Studies in Space Radiobiology	1/27/12	2/29/12	5/9/12	8/31/12	114	-36	69	50	26	2	13	26%
Research and Technology Development to Support Crew Health and Performance in Space Exploration Missions	8/23/11	9/22/11	12/19/11	4/27/12	130	-20	207	104	56 panelists / 29 mail	9	14 NASA /15 NSBRI	28%
Ground-Based Studies in Space Radiobiology	1/27/11	3/2/11	5/11/11	8/19/11	100	-50	79	55	26	2	8	15%
Research and Technology Development to Support Crew Health and Performance in Space Exploration Missions	7/23/10	9/2/10	12/1/10	4/19/11	139	-11	160	85	51 panelists / 15 mail	10	10 NASA / 2 NSBRI	14%
NASA NSCORs & Virtual NSCOR for Space Radiation Solid Cancer Risks and Biological Countermeasures	4/21/10	5/28/10	8/5/10	10/19/10	75	-75	26	16	10	2	5	31%
Ground-Based Studies in Space Radiobiology	1/8/10	2/16/10	4/20/10	8/26/10	127	-23	84	67	27 Panelists / 7 Mail	2	11	16%
Research and Technology Development to Support Crew Health and Performance in Space Exploration Missions	7/31/09	9/3/09	12/3/09	4/7/10	125	-25	51 NASA /49 NSBRI	32 NASA /18 NSBRI	40	6	7 NASA/5 NSBRI	24%
Ground-Based Studies in Space Radiobiology	3/17/09	4/23/09	6/25/09	9/16/09	82	-68	69	54	26	3	12	22%

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### **National Research Solicitations**



OMB Approval No. 2700-0087

- Human Exploration Research Opportunities (HERO) 2013, will solicit applied research in support of HEOMD's Human Research Program.
- Human Research Program will use an umbrella NASA Research Announcement (NRA) will now contain all areas of research solicited during the year.
  - Initial set of research topic appendices will be open for solicitation
  - Additional research topic appendices may be added as required
- Released on schedule July 30, 2013, the NRA is available electronically through NSPIRES by going to

http://nspires.nasaprs.com



National Aeronautics and Space Administration Johnson Space Center Human Exploration and Operations Mission Directorate Human Research Program Houston, TX 77058

#### **Human Exploration Research Opportunities (HERO)**

National Aeronautics and Space Administration

**NASA Research Announcement** 

Catalog of Federal Domestic Assistance (CFDA) Number: 43.003

NNJ13ZSA002N NRA Issued: July 30, 2013

OVERVIEW

Proposals Due Starting no earlier than September 4, 2013 Through no later than September 2, 2014

http://nspires.nasaprs.com/external/

### **National Research Solicitations**



#### 2012 NASA/NSBRI Crew Health and Performance

- NASA and NSBRI selected 23 meritorious proposals representing 14 states and 18 institutions.
  - Selected investigations address astronaut health and performance risks for future space exploration missions.
  - Approximately \$17 million over their lifetimes of one to three years
- Next Crew Health and Performance release in July 2013 as Appendix under HERO NRA

#### 2013 Space Radiobiology

- GCR Cancer Risks
- CNS and Circulatory Risks
- Review Panels Meeting end of July/August and Selections in September 2013
- Next Space Radiobiology release in 2014 as Appendix under HERO NRA

OMB Approval No. 2700 0087



National Aeronautics and Space Administration Johnson Space Center Exploration Systems Mission Directorate Human Research Program Houston, TX 77058

> Ground-Based Studies in Space Radiobiology

NASA Space Radiation Program Element

OMB Approval No. 2700-0087

27, 2013



National Aeronautics and Space Administration Johnson Space Center Human Exploration and Operations Mission Directorate Human Research Program Houston, TX 77058

#### Research and Technology Development to Support Crew Health and Performance in Space Exploration Missions

National Aeronautics and Space Administration and The National Space Biomedical Research Institute

**NASA Research Announcement** 

Catalog of Federal Domestic Assistance (CFDA) Number: 43.003

NNJ12ZSA002N NRA Issued: July 30, 2012 Step-1 Proposals Due: September 4, 2012 Step-2 Proposals Due: December 10, 2012

### ISS is Our Space Biomedical Laboratory and Gateway to Mars

Primary orbiting laboratory that enables space biomedical research involving crewmembers

Only facility capable of providing long-term exposure to the reduced-gravity environment of space

Equipped as a space biomedical research platform





# ISS Research -Critical to mitigating human exploration risks

#### On-Orbit Research Facilities



Human Research Rack-1



Human Research Rack-2



**Exercise Facilities** 

### Biomedical Research



**Nutritional Requirements** 



Immunological Changes



Physiological Changes and Exercise Countermeasures



Crew Sleep and Performance Research

Space Radiation Research

# ISS Research -Critical to mitigating human exploration risks

### Biomedical Capabilities Development



Lightweight Trauma Module



Integrated heath care system



Portable Medical Imaging

### International Research Collaborations



CSA Cardiovascular **Function Experiment** 



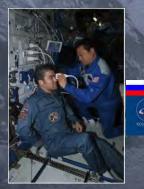
ESA Muscle Physiology Facility



IV Fluid Generation



JAXA Bone Loss Countermeasure Experiment



Russian Fluid Shift Countermeasure Experiment

# Exercise: solution for many of the space health issues

- Physical fitness benefits
  - Cardiovascular system
  - Aerobic capacity
  - Muscle mass and Bone strength
- Psychological Benefits
  - Antidepressant, Relieves stress, Better sleep







Lack of gravity requires exercise hardware to maintain baseline physical fitness

# **HRP ISS Fly-Off Plan**



HRP ISS Research Tactical Flight Plan (FY13 Q2 Update)

			0	(	-(	, ,		
Sponsor	Subjects Req'd	Subjects thru 31S	Req R+0/1	I33/34	I35/36	I37/38	I39/40	I41/42
				32S & 33S	348 & 358	36S & 37S	38\$ & 39\$	408 & 418
HHC/IP	10	1		2	1	1	2	2
ннс	30	30	Yes	2				
ннс	12	12	Yes	1				
ннс	N/A	28		3	2	2	3	3
ннс	13	7	Yes	1	3	2		
ННС	16	10	Yes	2	3	1	1	
ВНР	24	18	Yes	3	2	1		
ННС	20	4	Yes	0	0	1	1	1
ННС	20	1	Yes	0	1	0	1	0
ВНР	10 (US)	4		2	0	1	2	1
ННС	10	6 (TBC)		2	2	1		
ннс	12	-	Yes	1	1	0	2	1
ннс	8	-	Yes	2	1	2	2	1
ННС	6	-		2	3	2		
ННС	12	-			0	1	1	2
ВНР	3	-			0	2	or 3	
SHFH	9	-	Yes		2	2	2	2
ННС	12	-			2	2	2	2
ННС	50	-				2	2	2
ннс+внр	13	-				0	1	2
ННС	6	-	Yes			1	3	2
SHFH	12	-				2	2	2
	HHC/IP HHC HHC HHC HHC HHC HHC HHC HHC HHC HH	Sponsor         Subjects Req'd           HHC/IP         10           HHC         30           HHC         12           HHC         13           HHC         16           BHP         24           HHC         20           BHP         10 (US)           HHC         12           HHC         8           HHC         6           HHC         12           BHP         3           SHFH         9           HHC         12           HHC         50           HHC+BHP         13           HHC         6	Sponsor         Subjects Req'd         Subjects thru 31S           HHC/IP         10         1           HHC         30         30           HHC         12         12           HHC         N/A         28           HHC         16         10           BHP         24         18           HHC         20         4           HHC         20         1           BHP         10 (US)         4           HHC         12         -           HHC         8         -           HHC         12         -           BHP         3         -           SHFH         9         -           HHC         12         -           HHC         12         -           HHC         12         -           HHC         12         -           HHC         13         -           HHC<	Sponsor         Subjects Req'd         Subjects thru 31S         Req R+0/1           HHC/IP         10         1           HHC         30         30         Yes           HHC         12         12         Yes           HHC         N/A         28         —           HHC         13         7         Yes           HHC         16         10         Yes           BHP         24         18         Yes           HHC         20         4         Yes           HHC         20         1         Yes           BHP         10 (US)         4         —           HHC         10         6 (TBC)         —           HHC         8         —         Yes           HHC         12         —         —           HHC <td>Sponsor         Subjects Req'd         Subjects thru 31S         Req R+0/1         I33/34           HHC/IP         10         1         2           HHC         30         30         Yes         2           HHC         12         12         Yes         1           HHC         N/A         28         3         3           HHC         13         7         Yes         1           HHC         16         10         Yes         2           BHP         24         18         Yes         3           HHC         20         4         Yes         0           HHC         20         1         Yes         0           BHP         10 (US)         4         2           HHC         10         6 (TBC)         2           HHC         12         -         Yes         1           HHC         8         -         Yes         2           HHC         12         -         Yes         1           HHC         12         -         Yes         1           HHC         12         -         Yes         1           HHC</td> <td>Sponsor         Subjects Req'd         Subjects thru 31S         Req R+0/1         I33/34         I35/36           HHC/IP         10         1         2         1           HHC         30         30         Yes         2           HHC         12         12         Yes         1           HHC         13         7         Yes         1         3           HHC         16         10         Yes         2         3         2           HHC         16         10         Yes         2         3         2         1           HHC         16         10         Yes         2         3         2         1         1         1         2         3         2         1         1         1         2         0         1         1         1         2         1         1         1         1         1         1</td> <td>  Sponsor   Req'd   thru 31S   R+0/1   133/34   135/36   137/38  </td> <td>Sponsor         Subjects Req'd         Subjects thru 31S         Req R+0/1         I33/34         I35/36         I37/38         I39/40           HHC/IP         10         1         2         1         1         2           HHC         30         30         Yes         2        </td>	Sponsor         Subjects Req'd         Subjects thru 31S         Req R+0/1         I33/34           HHC/IP         10         1         2           HHC         30         30         Yes         2           HHC         12         12         Yes         1           HHC         N/A         28         3         3           HHC         13         7         Yes         1           HHC         16         10         Yes         2           BHP         24         18         Yes         3           HHC         20         4         Yes         0           HHC         20         1         Yes         0           BHP         10 (US)         4         2           HHC         10         6 (TBC)         2           HHC         12         -         Yes         1           HHC         8         -         Yes         2           HHC         12         -         Yes         1           HHC         12         -         Yes         1           HHC         12         -         Yes         1           HHC	Sponsor         Subjects Req'd         Subjects thru 31S         Req R+0/1         I33/34         I35/36           HHC/IP         10         1         2         1           HHC         30         30         Yes         2           HHC         12         12         Yes         1           HHC         13         7         Yes         1         3           HHC         16         10         Yes         2         3         2           HHC         16         10         Yes         2         3         2         1           HHC         16         10         Yes         2         3         2         1         1         1         2         3         2         1         1         1         2         0         1         1         1         2         1         1         1         1         1         1	Sponsor   Req'd   thru 31S   R+0/1   133/34   135/36   137/38	Sponsor         Subjects Req'd         Subjects thru 31S         Req R+0/1         I33/34         I35/36         I37/38         I39/40           HHC/IP         10         1         2         1         1         2           HHC         30         30         Yes         2

Baselined Flights/Approved Complements/Consented Crew



#### **HRP ISS Investigations: New**



- NASA Biochemical Profile Project (Biochemical Profile) Targeting Inc. 37/38 start
- Assessing the Impact of Communication Delay on Behavioral Health and Performance: An Examination of Autonomous Operations Utilizing the International Space Station (Comm Delay) – Targeting Inc. 39/40 start
- Occupational Risk Surveillance for Bone: Pilot Study-Effects of In-Flight Countermeasures on Sub-Regions of the Hip Bones (Hip QCT) – Will request data sharing from crewmembers who have previously flown, as well as future crewmembers starting with Inc. 35/36
- Study of the Impact of Long-Term Space Travel on the Astronaut's Microbiome (Microbiome) Targeting Inc. 35/36 start
- Spaceflight Effects on Neurocognitive Performance: Extent, Longevity and Neural Bases (NeuroMapping) – Targeting Inc. 39/40 start. Uses ESA Gamepad hardware
- Prospective Observational Study Of Ocular Health In ISS Crews (Ocular Health) Targeting Inc. 35/36 start
- The Effects of Long-Term Exposure to Microgravity on Salivary Markers of Innate Immunity (Salivary Markers) – Targeting Inc. 37/38 start
- Sonographic Astronaut Vertebral Examination (Spinal Ultrasound) starting in Inc. 33/34
- Defining the relationship between biomarkers of oxidative and inflammatory stress and the risk for atherosclerosis in astronauts during and after long-duration spaceflight (Cardio Ox)
   Targeting Inc. 37/38 start

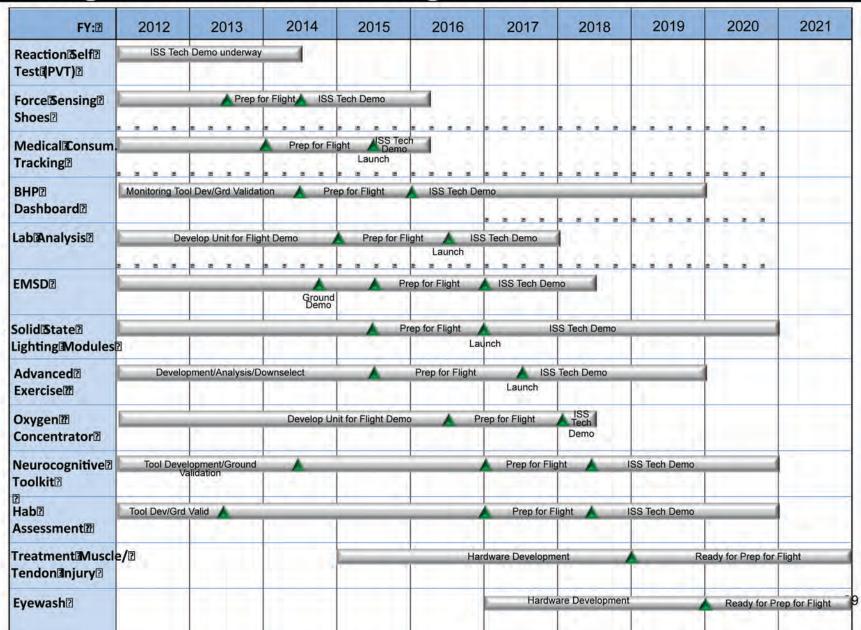
#### HRP ISS Investigations: International Collaborations



- NASA/HRP provides integration/hardware sharing support and BDC support for all human subject studies.
- BDC support only for Increments 31/32 through 35/36 (April 2012 September 2013):
  - Basic study on scale planning of living quarters in space architecture based on psychology and ergonomics under weightlessness (Unwinding – JAXA Educational Payload Overview (EPO))
  - Biomedical Analysis of Human Hair Exposed to a Long-term Space Flight (Hair JAXA)
  - CHUON (The Space Voice of the Open Mind)- What sensation does the "CHUON" produce in space (CHUON – JAXA EPO)
  - Circadian Rhythms (Circadian Rhythms ESA)
  - Effect of Gravitational Context on EEG Dynamics: A Study of Spatial Cognition, Novelty Processing, and Sensorimotor Integration (Neurospat – ESA)
  - Evaluation of Onboard Diagnostic Kit (Onboard Diagnostics Kit 2 JAXA)
  - Perspective Reversible Figures in Microgravity (Reversible Figures ESA)
  - Plastic Alteration of Vestibulo-Cardiovascular Reflex and its Countermeasure (V-C Reflex JAXA)
  - Space Headaches: Incidence and Characteristics (Space Headaches ESA)
  - RaDI-N-2 Neutron Field Study (RaDI-N-2 CSA)
  - Effect of Microgravity on Cartilage Morphology and Biology (Cartilage ESA)
  - ELaboratore Immagini TElevisive Space 2 (ELITE-S2 ASI/NASA)

# ISS Technology Demonstrations Strategic Plan FY 2012 through FY 2021

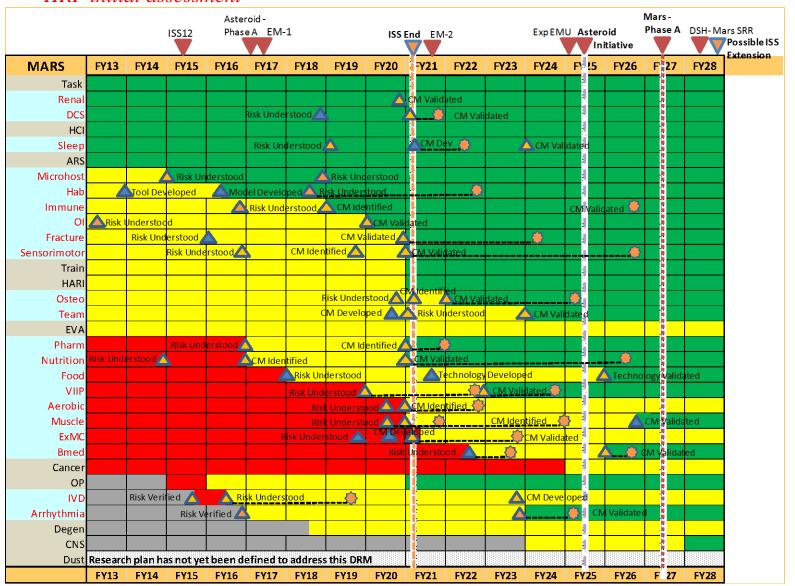




#### **Integrated Human Health Risk Reduction Schedule**



HRP initial assessment



#### Legend

HRP Risk

Requires ISS

HRP Risk

ISS Not Required

Milestone uses ISS



Milestone slip due to insufficient "N" on ISS



Unacceptable

Acceptable

Controlled

Insufficient Data



#### HRP Integrated Schedule: Human Health Risk Reduction

#### • Integrated ISS Human Health Risk Reduction Fly-off Plan

- Insufficient number of ISS subjects available through 2020
  - Based on available flight subjects overlay on to Integrated ISS Human Health Risk Reduction Fly-off Plan
- Indicates a shortfall of at least 300 experiment research subjects that would require ISS biomedical research through at least 2026
- Chart shows risks that require both ISS to mitigate (orange font/blue background) and risks that don't require ISS (black font/tan background)



#### **HRP Progress in Selected Research Areas**



- Space Radiation Space Radiation Cancer Risk Model
- Exercise Summary Bone, Muscle, Cardiovascular
- Visual Impairment & Intracranial Pressure Update

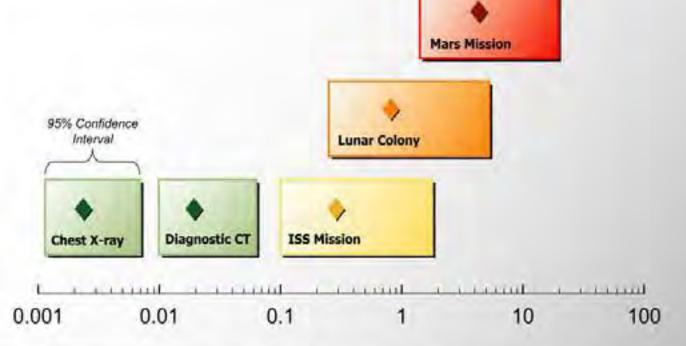
#### **NASA Space Radiation Cancer Risk Model**



- NASA has updated its Space Radiation Cancer Risk Model based on recent research results and epidemiological studies
  - The National Academy of Sciences, National Research Council completed its Evaluation of Space Radiation Cancer Risk Model: Report



Technical Evaluation



#### Maximum "Safe" Days in Deep Space (NASA 2012)



- Uncertainties in Estimating Risks are major limitation to space travel
- Solar Min Maximum Days in Deep Space (heavy shielding) to 95% Confidence to be below NASA Limits for cancer risk: (parenthesis is deep solar min of 2009)

 Solar Max Maximum Days in Deep Space (heavy shielding) to 95% Confidence to be below NASA Limits for cancer risk alone (parenthesis is for case of ideal storm shelter which negates any SPE cancer risk):

a <sub>E</sub> , y	a <sub>E</sub> NASA 2005 NASA 2012NASA 2012 NASA 2012NASA 2012					
	U.S. Avg. Rub βu Kartigo.n Popul aktieower-smolklews-r-smokers					
	MaWeeles					
35	35	158	306 (357)	209 (205)	395 (458)	271 (256)
45	45	207	344 (397)	232 (227)	456 (526)	308 (291)
55	55	302	367 (460)	274 (256)	500 (615)	351 (335)
	Fleemate's					
35	35	129	144 (187)	106 (95)	276 (325)	187 (180)
45	45	173	187 (232)	139 (125)	319 (394)	227 (212)
55	55	259	227 (282)	161 (159)	383 (472)	277 (246)

### **Exercise Summary**

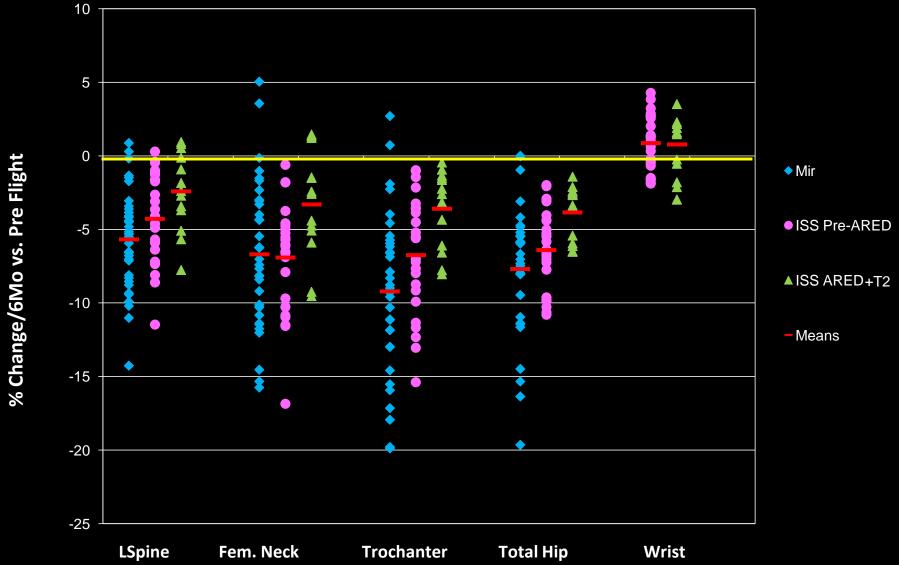
NASA

- Exercise countermeasures continue to improve for protection of cardiovascular, skeletal muscle and bone health.
- Addition of T2 and ARED contributed positively to the improvements.
- Decrements are still observed for cardiovascular, muscle and bone.



### Change in DXA BMD





#### Change in DXA BMD after long-duration space flight



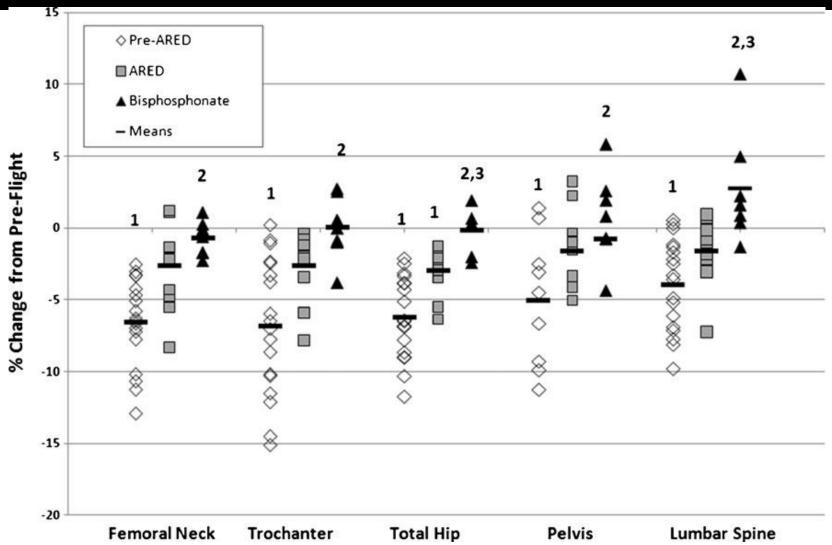
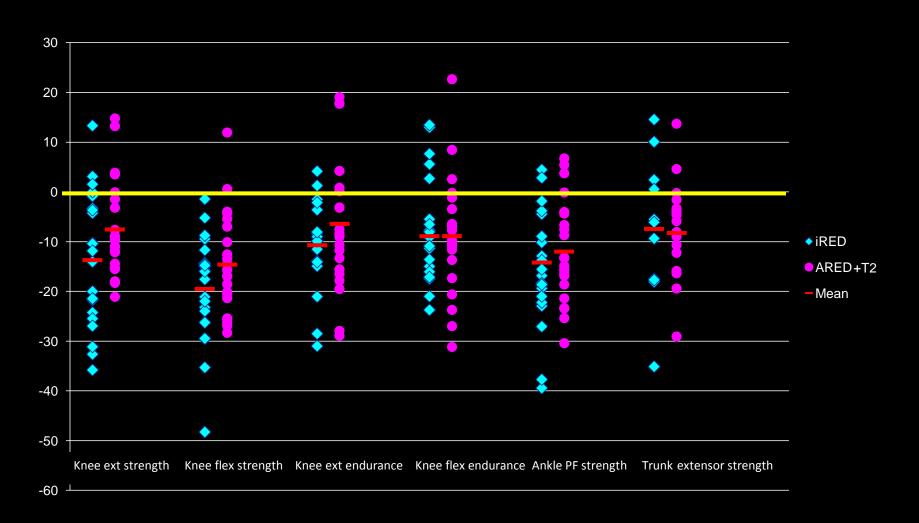


Fig. 1 Change in DXA BMD after long-duration space flight. 1 p<0.05, pre vs. post; 2 p<0.05 (bisphosphonate group significantly different from pre-ARED); 3 p<0.05 (bisphosphonate group significantly different from ARED). Pre-ARED (n=18); ARED (n=11); bisphosphonate (n=7). A. LeBlanc et al, Osteoporos Int, January 20128

### Muscle Function

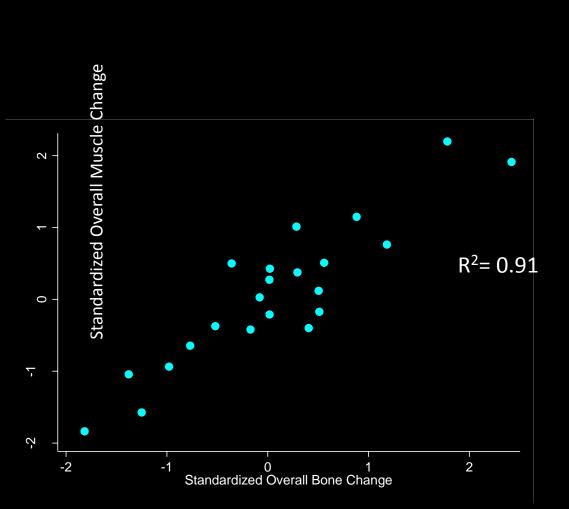


Exp 1-32 (IRED n=22 ARED+T2 n=25)



## Muscle and Bone Change Similarly





#### Muscle contributors

Con & ecc ankle plantar flexion Con & ecc ankle dorsi flexion Hamstring total work Hamstring isokinetic strength QF total work QF isokinetic strength

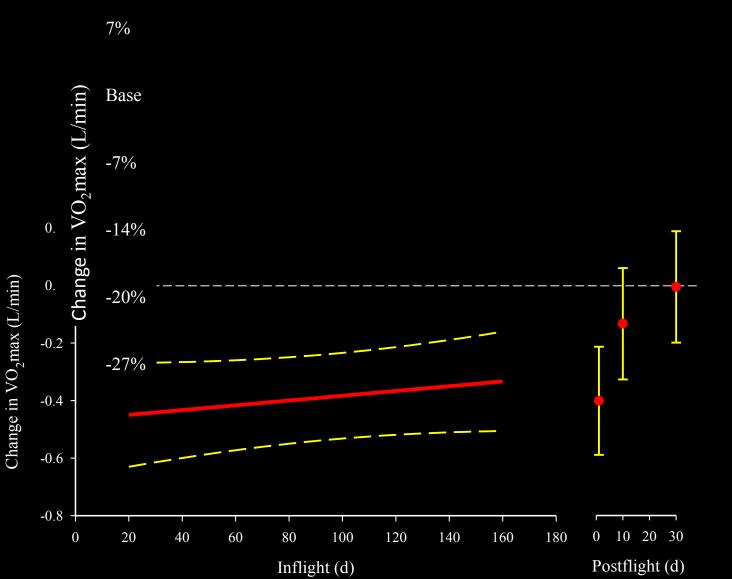
#### **Bone Contributors**

Lumbar spine BMD Femoral neck BMD Pelvis BMD Calcaneous BMD Whole body BMD



## VO<sub>2</sub>max (VO<sub>2</sub>peak) on ISS

N=10



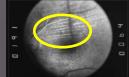
#### Integrated Vision Impairment & Intracranial Pressure Project

Risk Background - Symptoms



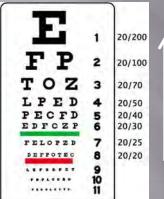
#### Background:

- •19 known "clinical cases" (of 41 long duration crew) members
  - •Each with different degrees of symptoms
  - •Does not currently include data from international partners
  - Current assessment of Russian participation underway

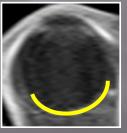


#### Hyperopic Shifts

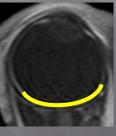
-Up to +1.75 diopters



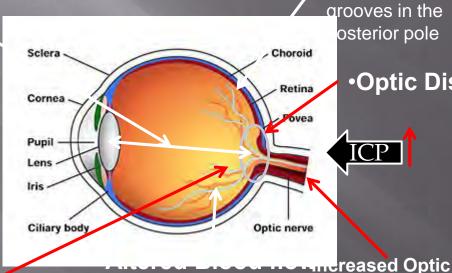
#### Globe Flattening



Normal Globe Fla



Flatten Globe



MRI Orbital Image showing globe flattening





For NASA Internal Use Only

osterior pole

•Choroidal

Folds parallel

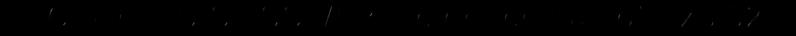
**Nerve Sheath Diameter** 

Optic Disc Edema(swelling)



ScotomaAltered/DisruptedVisual Field





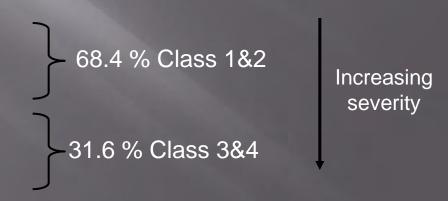


#### 41 U.S. ISS crew flown to date as of Expedition 32:

- Unclassified crew N=16 (No MRI, OCT or ocular US)
- Non-cases N=6
- Confirmed cases: 19

#### **Clinical Classification:**

- Class One N=2
- Class Two N=11
- Class Three N=2
- Class Four N=4



Current VIIP Incidence as a % of U.S. ISS crew tested= 76.0%

### Vision Impairment & Intracranial Pressure Risk Update

#### Least Severe Symptoms

#### Class 0

- < .50 diopter cycloplegic refractive change</li>
- No evidence of papilledema, nerve sheath distention, choroidal folds, globe flattening, scotoma or cotton wool spots compared to baseline.

#### Class 1

- Refractive changes ≥ .50 diopter cycloplegic refractive change and/or cotton wool spot
- No evidence of papilledema, nerve sheath distention, choroidal folds, globe flattening, scotoma compared to baseline.
- CSF opening pressure (if measured) ≤ 25 cmH2O

Monitoring: repeat OCT & visual acuity in 6 weeks

#### Class 2

- Class 1 plus:
- Choroidal folds and/or optic nerve sheath distension and/or globe flattening and/or scotoma
- No evidence of papilledema
- CSF opening pressure ≤ 25 cm H2O (if measured)

Monitoring: Repeat OCT, cycloplegic refraction, fundus exam and threshold visual field every 4 -6 weeks x 6 months, repeat MRI in 6 months

Most Severe Symptoms

#### Class 3

- Class 2 plus:
- Papilledema of Grade 0-2.

**Monitoring:** repeat OCT, cycloplegic refraction, fundus exam and threshold visual field every 4 -6 weeks x 6 months, repeat MRI in 6 months

#### Class 4

- Class 3 plus:
- Papilledema Grade 2 or above.
- Presenting symptoms of new headache, pulsatile tinnitus and/or transient visual obscurations
- CSF opening pressure >25 cm H2O

Institute treatment protocol as per CPG – **LP**, repeat For NASA Internal Use Only MRIs, pharmaceutical intervention

# Pre to Postflight Papilledema: A Clinical Sign of Raised Intracranial Pressure



#### Pre Flight

Fundoscopic images of the right and left optic disc.

### Post Flight

Fundoscopic images of the right and left optic disc showing **Grade 3 edema right** and **Grade 1 edema left**.

